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FACSIMILE TRANSMISSION

TO: USPTO DATE: September 1, 2004
Art Unit: 3636

FROM: W. Thad Adams, III FACSIMILE NO: (703) 872-9306
Reg. No. 29,037

RE: **Our File No. 3144/14; U.S. Patent Application Serial No. 10/611,804 for "VISIBLE INFORMATION CARRIER"**

CONFIRMATION COPY
TO FOLLOW:

YES _____ NO ☒

NUMBER OF PAGES: Cover + 3

MESSAGE: Please see the following submissions for the above-referenced patent application:

- Transmittal Letter;
- Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address; and
- Statement under 37 CFR 3.73(b).

Also, please confirm receipt of this facsimile. Thank you.

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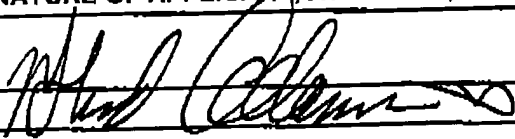
PTO/SB/21 (02-04)

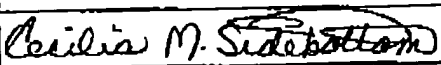
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/611,804	
	Filing Date	07/01/2003	
	First Named Inventor	BALOGA	
	Art Unit	3638	
	Examiner Name		
Total Number of Pages in This Submission	4	Attorney Docket Number	3144/14

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Statement under 37 CFR 3.73(b); Facsimile Cover Sheet
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	If there are any fees due in connection with this matter, please charge Deposit Acct. 01-0265.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	W. Thad Adams, III Reg. No. 29,037
Signature	
Date	09/01/2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Cecilia M. Sidebottom
Signature	
Date	09/01/2004

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PTO/SB/82 (09-03)

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**REVOCATION OF POWER OF
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NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/611804
Filing Date	07/01/2003
First Named Inventor	BALOGA
Art Unit	3636
Examiner Name	
Attorney Docket Number	3144/14

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I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

23638

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

23638

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name

Gary Papp

Signature

Date

Telephone

704-375-9249

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Thomas C. Baloga, et al.Application No./Patent No.: 10/611804 Filed/Issue Date: 07/01/2003Entitled: VISIBLE INFORMATION CARRIERBRITAX CHILD SAFETY INC., a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014324, Frame 0938, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

6/15/04
Date

704-375-9249

Telephone number

Gary Papp

Typed or printed name

[Signature]
Signature

Vice President of Finance
Title

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